

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		8/19/99
O.I.P.E. CLASSIFIER	JW	6874	8/29
FORMALITY REVIEW			8-31-99

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1/14/99
2	✓	✓	1/14/99
3	✓	✓	1/14/99
4	✓	✓	1/14/99
5	✓	✓	1/14/99
6	✓	✓	1/14/99
7	✓	✓	1/14/99
8	✓	✓	1/14/99
9	✓	✓	1/14/99
10	✓	✓	1/14/99
11	✓	✓	1/14/99
12	✓	✓	1/14/99
13	✓	✓	1/14/99
14	✓	✓	1/14/99
15	✓	✓	1/14/99
16	✓	✓	1/14/99
17	✓	✓	1/14/99
18	✓	✓	1/14/99
19	✓	✓	1/14/99
20	✓	✓	1/14/99
21	✓	✓	1/14/99
22	✓	✓	1/14/99
23	✓	✓	1/14/99
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26	✓	✓	1/14/99
27	✓	✓	1/14/99
28	✓	✓	1/14/99
29	✓	✓	1/14/99
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31	✓	✓	1/14/99
32	✓	✓	1/14/99
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34	✓	✓	1/14/99
35	✓	✓	1/14/99
36	✓	✓	1/14/99
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42	✓	✓	1/14/99
43	✓	✓	1/14/99
44	✓	✓	1/14/99
45	✓	✓	1/14/99
46	✓	✓	1/14/99
47	✓	✓	1/14/99
48	✓	✓	1/14/99
49	✓	✓	1/14/99
50	✓	✓	1/14/99

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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